Case 2:06-cv-00325-WKW-VPM Document 1-6 Filed 04/11/2006 CHILD SUPPORT OBLIGATION State of Alabama Unified Judicial System INCOME STATEMENT/AFFIDAVIT Form CS-41 Rev. 10/93 COUNTY COURT OF IN THE . ℓ√___v. Defendant **Plaintiff AFFIDAVIT** , being duly sworn upon my oath, state as follows: in the above entitled matter. defendant 1. lam the plainuil My Social Security number is: 418256257 currently employed. My employer's name and address is: My last employer's name and address is: 6.11 Micro Products Not currently employed. Last position title: Sales Rep Average monthly salary last year of employment: \$ 3. My gross monthly income includes: (For examples of income that must be included, see back of form—If income varies by month, enter the estimated average monthly income.) Employment income Self-employment income Other employment-related income Other non-employment related income Total 3a. Lincur the following amount monthly for child-care. 3b. The child(ren) of the parties is/are not covered by health insurance from me and/or my employer. covered by health insurance and I pay the following amount monthly for the insurance coverage 4. Lunderstand that I will be required to maintain all income documentation used in preparing this affidavit (including my most recent income tax return) and that such documentation shall be made available as directed by the court. 5. I understand that any intentional falsification of the information presented in this income statement/affidavit shall be deemed contempt of court.

Sworn to and subscribed before me this

Notary/Clerk/Register

Affiant